

numbers of persons are certified as blind, and thereby are placed in a position to draw pensions and other advantages from public and charitable funds who are not entitled to such benefits, while others of the blind population never come under observation at all. Any statistics which may at present exist are therefore quite misleading.

4. A system under which the entire blind population comes under review needs to be established, and steps should be taken to ensure that it be of universal application.

5. The system of clinics which has now been working for two years in Glasgow has proved its efficiency and meets with the warm approval of the committee, and on some such basis similar clinics should be established in all large centres of population.

6. The system adopted should also be available for use in isolated areas by ophthalmic surgeons recognized for the purpose of certification. Such surgeons should have power to refer doubtful cases to the nearest clinic.

7. The determination of the suitability of children of school age for special forms of education and of applicants for technical training under the Blind Persons Act, should be a function of the surgeons working the system.

8. Certificates of blindness, except such as are granted by ophthalmic surgeons working the system, should not be accepted by public authorities or by charitable agencies.

9. If such a scheme as is contemplated above can be adopted, the causes of blindness will be duly ascertained and recorded on a uniform basis for the whole kingdom, and statistics of the most varied character will be available in a way unequalled by any other nation.

MEDICAL RESEARCH COUNCIL

ROCKEFELLER MEDICAL FELLOWSHIPS

The Rockefeller Medical Fellowships for the academic year 1932-33 will shortly be awarded by the Medical Research Council, and applications should be lodged with the Council not later than June 1st, 1932.

These Fellowships are provided from a fund with which the Medical Research Council has been entrusted by the Rockefeller Foundation. Fellowships are awarded by the Council, in accordance with the desire of the Foundation, to graduates who have had some training in research work in the primary sciences of medicine or in clinical medicine or surgery and are likely to profit by a period of work at a university or other chosen centre in the United States before taking up positions for higher teaching or research in the British Isles. In special circumstances the Fellowships may be tenable at centres of research not in America.

A Fellowship held in America will have the value of not less than £350 a year for a single Fellow, with extra allowance for a married Fellow, payable monthly in advance. Travelling expenses and some other allowances will be paid in addition. Full particulars and forms of application are obtainable from the secretary, Medical Research Council, 38, Old Queen Street, Westminster S.W.1.

DOROTHY TEMPLE CROSS RESEARCH FELLOWSHIPS IN TUBERCULOSIS

The Dorothy Temple Cross Research Fellowships in Tuberculosis for the academic year 1932-33 will shortly be awarded by the Medical Research Council, and applications should be lodged with the Council not later than June 1st, 1932.

The object of these Fellowships, as defined in the trust deed, is to give special opportunities for study and research to persons "intending to devote themselves to the advancement by teaching or research of curative or preventive treatment of tuberculosis in all or any of its forms." Candidates must be British subjects, and must possess suitable medical, veterinary, or scientific qualifications. They must also be able to produce satisfactory evidence of their ability to make good use of the opportunities offered by the Fellowships.

The Fellowships will preferably be awarded to candidates who wish to make their studies or inquiries outside the borders of Great Britain. They will be awarded for one year as a rule, but in special cases may be renewed. The value of the Fellowships awarded will depend in each case upon the standing and qualifications of the candidate, but will not be less than £350 per annum, payable monthly in advance. Travelling and some incidental expenses will be paid in addition. It may also be possible to award a Senior Fellowship of considerably greater value to a specially well-qualified candidate wishing to undertake an intensive study of some particular problem of tuberculosis at a chosen centre of work in another country.

Further particulars and forms of application are obtainable from the secretary of the Medical Research Council.

TREATMENT OF CANCER

MINISTRY OF HEALTH'S CIRCULAR

In a memorandum issued to-day (Circular 1276) the Ministry of Health invites the attention of local authorities to measures which may facilitate the treatment of cancer patients, and emphasizes the wider provision for radiological treatment now available as a result of the work of the National Radium Trust and of the Radium Commission. The facilities provided by the latter organizations are distributed all over Great Britain. The Radium Commission decided from the outset to concentrate radium therapy at certain hospital centres nominated by the medical faculty of the local university, and has secured the establishment of national centres in provincial voluntary hospitals at Birmingham, Bristol, Leeds, Liverpool, Manchester, Newcastle-on-Tyne, Sheffield, and Cardiff. It is now thought that as these centres are somewhat unevenly distributed, there is need for a number of smaller regional centres in the East Anglian and South-Western districts. As part of their agreements with the Radium Commission for loans of radium, the hospitals mentioned undertake to organize the radium to the maximum practicable advantage of patients, to set aside as many beds for patients undergoing treatment as will keep the radium fully employed, to treat suitable patients coming from any sources (including rate-aided institutions), and to keep full records of cases. Owing to varying factors, such as distance of area from a convenient centre, facilities for consultation, transport of patients, etc., it is impossible to lay down rules for general application as to the arrangements which local authorities should make for the fullest benefit of the inhabitants of their areas. It is, however, recommended that the local authority should fix upon the hospital where a conveniently situated radium centre is established, and make arrangements for the residents in the area to obtain radium treatment in that centre whenever necessary.

As regards cancer cases in general, it should, states the memorandum, be realized that adequate treatment requires all the resources of a hospital with modern equipment. It may thus be necessary for local authorities to provide for the removal of patients from a less to a more fully equipped hospital. A scheme of cancer inquiry such as that outlined in Circular 1136 is of advantage in this respect, because it provides a suitable means of deciding how the needs of patients in any particular area can best be met. Attention is also drawn to the provision in the normal course of health service of facilities which incidentally help in the prevention, detection, and early treatment of cancer. Maternity and child welfare, venereal disease, and tuberculosis services are valuable in the prevention of cancer by securing treatment for conditions which may favour its onset; for the adequate care of women in childbirth may help to prevent later occurrence of uterine cancer, the effective treatment of syphilis may be of value in the prophylaxis of cancer of the tongue; while the effective treatment of lupus and of scrofuloderma may prevent the subsequent appearance of cancer.